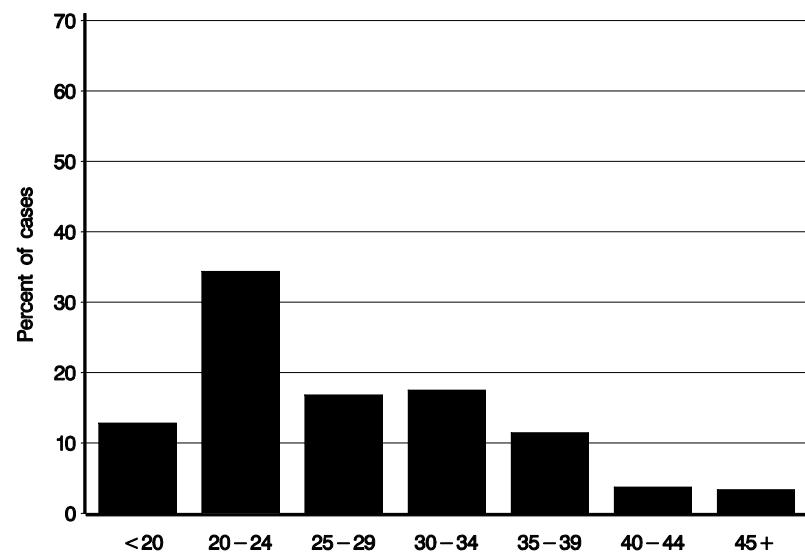
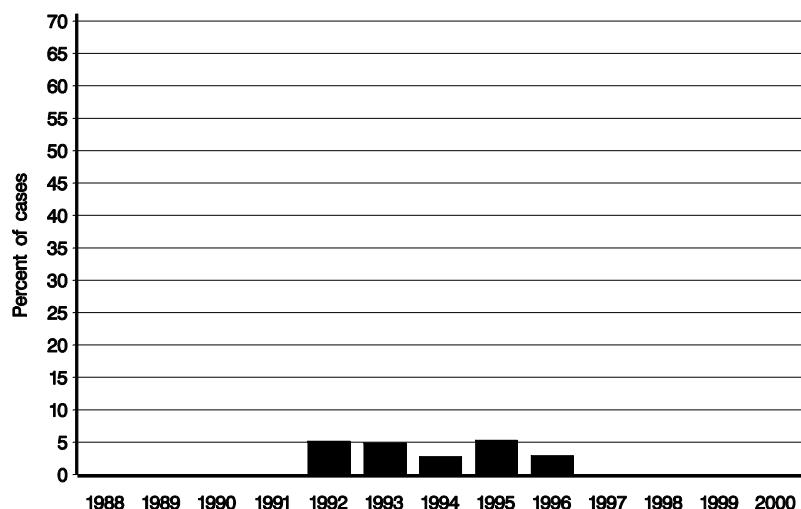


**Minneapolis, Minnesota — 2000 (N=297)**

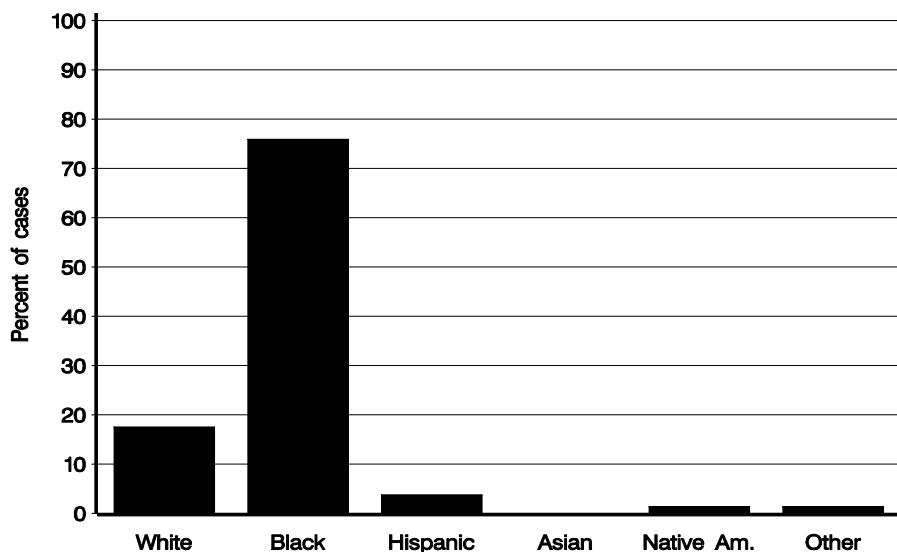
**Figure A. Age of GISP participants, in years, 2000**



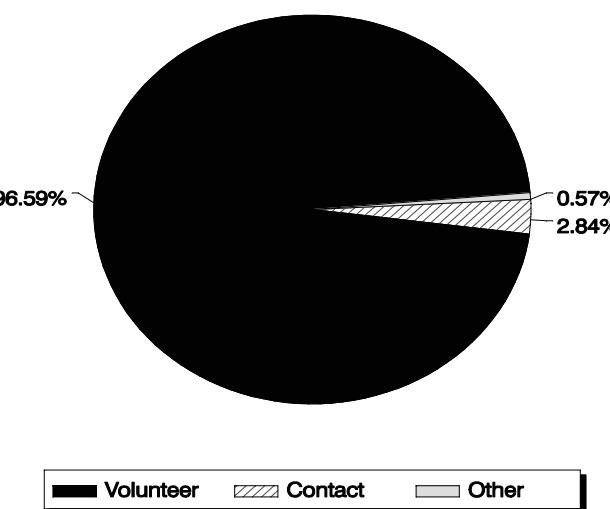
**Figure C. Percentage of GISP participants identifying as men who have sex with men, 1988–2000**



**Figure B. Race/ethnicity of GISP participants, 2000**

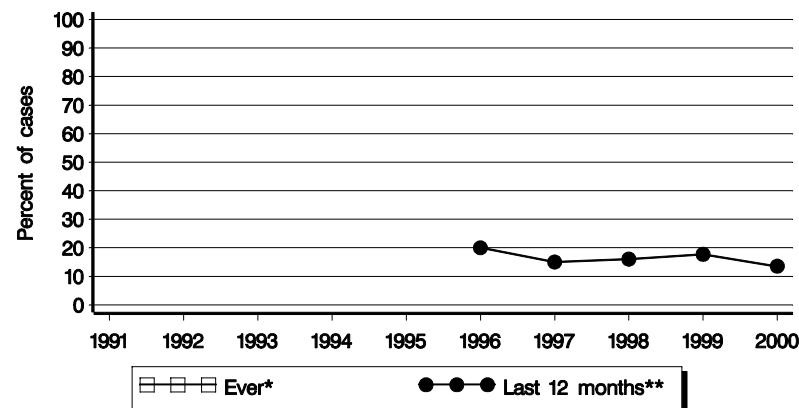


**Figure D. Reason for visit among GISP participants, 2000**



## Minneapolis, Minnesota – 2000 (N=297)

**Figure E. Previous episode of gonorrhea among GISP participants, 1991–2000**

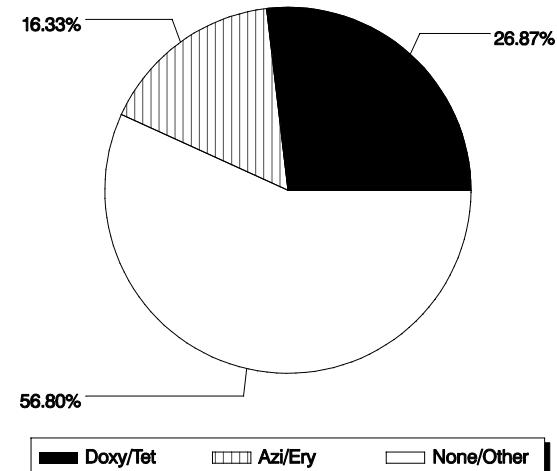


\*Data first collected in 1991.

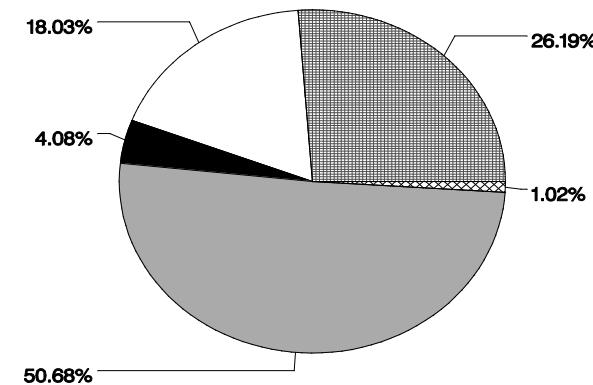
\*\*Data first collected in 1992.

Note: Data points not shown when >30% data missing.

**Figure G. Drugs used to treat *Chlamydia trachomatis* infection among GISP participants, 2000**

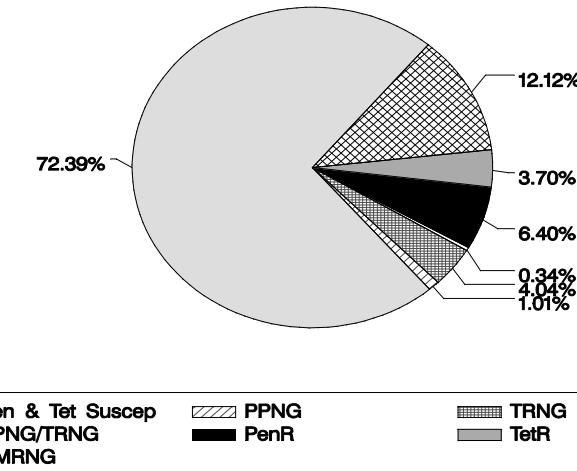


**Figure F. Drugs used to treat gonorrhea among GISP participants, 2000**



■ Cefixime      □ Ciprofloxacin      ─ Ceftriaxone 250  
 ■ Other Cephalo.      □ None

**Figure H. Resistance to penicillin and tetracycline among GISP isolates, 2000**



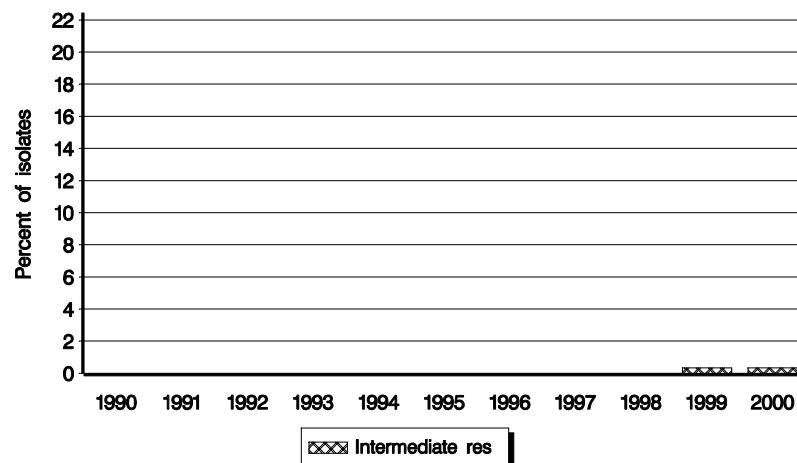
■ Pen & Tet Suscep      □ PPNG  
 □ TRNG      ─ PenR  
 □ CMRNG      ■ TetR

## Minneapolis, Minnesota – 2000 (N=297)

Figure I. Decreased susceptibility to ceftriaxone among GISP isolates, 1988–2000

No isolates with decreased susceptibility to ceftriaxone have been identified at this clinic.

Figure K. Intermediate resistance and resistance to ciprofloxacin among GISP isolates, 1990–2000

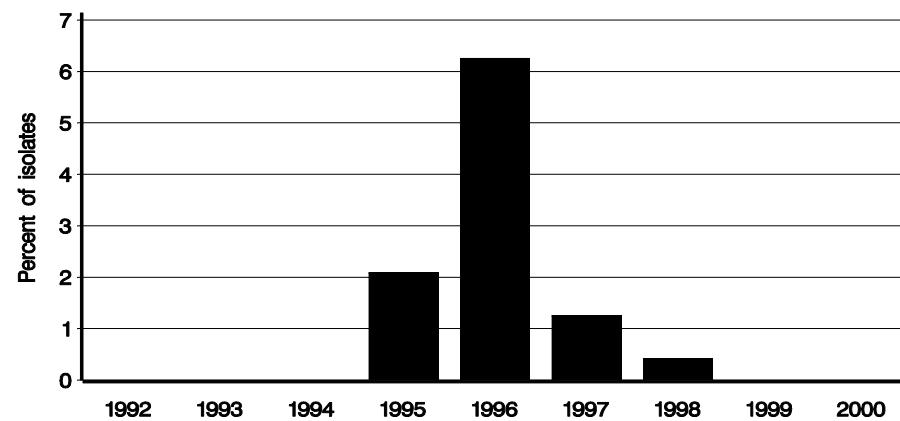


Note: Susceptibility to ciprofloxacin first measured in 1990.

Figure J. Decreased susceptibility to cefixime among GISP isolates, 1992–2000

No isolates with decreased susceptibility to cefixime have been identified at this clinic.

Figure L. Decreased susceptibility to azithromycin among GISP isolates, 1992–2000



Note: Susceptibility to azithromycin first measured in 1992.

Note: Decreased susceptibility to azithromycin is defined here as  $>$  or  $=$  1.0 ug/ml.

No NCCLS criteria currently exist.